



2015 MEMBERSHIP FORM



2015 LORAIN COUNTY SPEEDWAY CREW MEMBERSHIP FORM		
APPLICANT INFORMATION		
Name:		
Date of birth: (DD/MM/YY)	Cell Phone:	Alt Phone:
Current address:		
City:	State:	Postal/Zip:
Email:	Birthplace:	
CAR INFORMATION YOU CREW ON		
<i>(Please circle)</i> Modified Crate Sprint Grand National Charger		
Car Number		
Car Driver		
EMERGENCY CONTACT <i>(REQUIRED SECTION)</i>		
Name of Emergency Contact 1:		Relationship:
Phone:	Alt Phone:	
Name of Emergency Contact 2:		Relationship:
Phone:	Alt Phone:	
GENERAL INFORMATION <i>(WILL BE USED FOR DRIVERS PROFILE AND ANNOUNCERS)</i>		
Marital Status:	Spouse's Name:	
Years in Racing:	Children's Names:	
Racing Accomplishments:		
Twitter: @	Facebook:	
Website:		
OFFICE USE ONLY		
Received by:		Date Completed:
SIGNATURE		
I authorize the information provided on this form.		
Signature of applicant:		Date:

→ → Signature Required on Back → →



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(Must be completed by all applicants)

I HEREBY CERTIFY that any license hereunder is granted for the sole purpose of enabling me to participate in a race, or other motorsports-related activity.

I HEREBY AGREE that by signing this Competition Application that I will abide by all rules and regulations as set forth by Lorain County Speedway including, but not limited to, the following:

- (1) I agree to abide by all rules and regulations, including car specifications and safety rules;
- (2) I agree that I shall be the sole spokesperson for myself, the car owner, and the race crew in all matters pertaining to the compliance with the rules and regulations, and I agree and understand that I am responsible for the conduct of my crew;
- (3) I agree and understand that by submitting my race car for various technical and safety inspections, I certify that the race car meets all rules and regulations for participation in a Lorain County Speedway event, and I understand that the burden of proof will rest upon me to show that I am in compliance with all of the Lorain County Speedway rules and regulations, and I understand that any violation of such rules and regulations may result in confiscation of illegal parts, fines, suspension, and/or loss of points;
- (4) I agree to appropriately use all potentially required stickers, decals and patches and I understand that failure to do so may result in loss of points and forfeiture of all money and awards for the event;
- (5) I agree that all decisions of Lorain County Speedway race officials, or track officials, regarding the interpretation and application of the Lorain County Speedway rules, regulations and the scoring of positions (race day decisions), shall be non-disputable.
- (6) I hereby assign to Lorain County Speedway and Lorain County Speedway Sponsors the non-exclusive rights to my image and likeness, and the image of my vehicle, whether portrayed in still or action pictures, drawings, or other artistic renderings, relating to or depicting my participation in a Lorain County Speedway event; but only in connection with advertising and promotions relating to the Event and the 2015 & 2016 Season.
- (7) I further understand that there is no express or implied warranty of safety resulting from publication or compliance with the Lorain County Speedway rules, and that they are intended merely as a guide and are minimum requirements for the conduct of the sport and are in no way a guarantee against injury or death to participants, spectators, or others;

The undersigned acknowledges that auto racing and related events are HAZARDOUS activities which carry with them significant risk of personal injury, death, or property damage. I also understand that there are natural, mechanical, and environmental conditions and risks, which independently or in combination with the activities may cause property damages or severe or even fatal injuries to others or me. I have made a voluntary choice to participate in the activities. I agree to accept all responsibility for the risks, conditions and hazards, which may occur whether or not they are known or contemplated by me. Except as set forth below, I hereby expressly assume any and all of the foregoing risks including the risks of injury, death, or property damage and accept sole responsibility for the safety and medical insurance costs of the participant.

Applicant's Signature: X _____

Applicant's Name: _____
(Please Print)

Date: _____ (MM/DD/YY)

Drivers Signature: X _____

By signing here you acknowledge that this applicant is a crew member on your team and you accept full responsibility for their actions.



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Return Signed and Completed Application to:

Lorain County Speedway

Attn: Membership Form

4580 Selhurst Rd

N. Olmsted, OH 44070

Or Email to: lcspeedway@live.com